

F 280

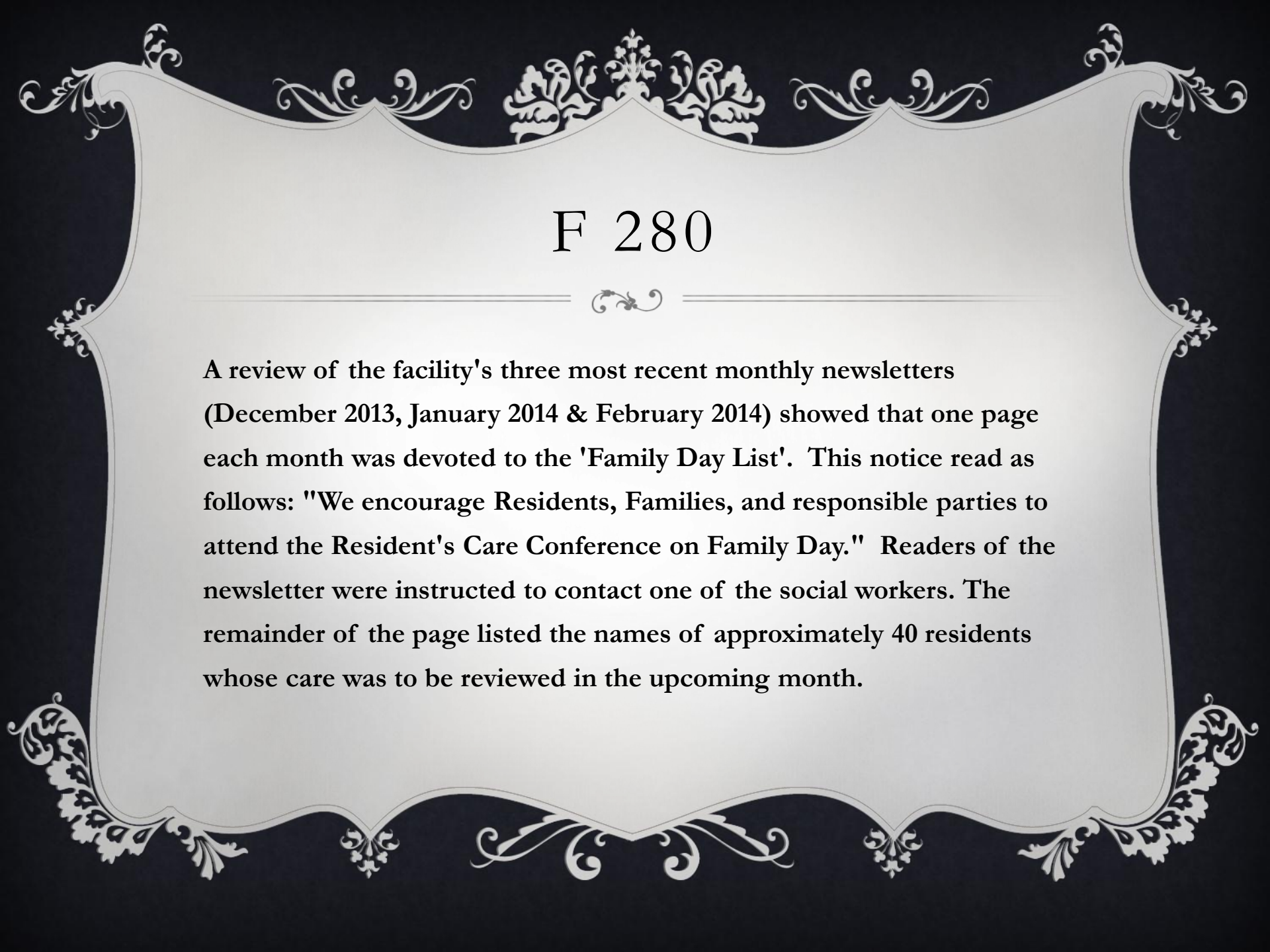
*THE RESIDENT HAS THE RIGHT TO—UNLESS
ADJUDGED INCOMPETENT OR OTHERWISE FOUND
TO BE INCOMPACITATED UNDER THE LAWS OF THE
STATE, PARTICIPATE IN PLANNING CARE AND
TREATMENT OR CHANGES IN CARE AND
TREATMENT*

F 280

Based on interview and record review, the facility failed to ensure residents the right to participate in planning their own care for 12 (Residents #9, #16 and confidential Residents #C75, #C76, #C77, #C78, #C79, #C80, #C81, #C82, #C84 & #C90) of 26 residents reviewed for care plans from a facility population of 131 residents. This deficient practice resulted in the increased potential for these residents to feel marginalized, disempowered and helpless. Findings include:

F 280

On 2/11/14 at 3:00 p.m., a group meeting was held with ten residents whom the facility identified as being able to give input on the care and services at the facility. When these residents were asked if they were invited to their care conferences, Residents #C75, #C76, #C77, #C78, #C79, #C80, #C81, #C82, #C84 replied in the negative. These residents were unsure what a care conference was, and stated they had never heard of such a conference or attended any similar meeting.



F 280

A review of the facility's three most recent monthly newsletters (December 2013, January 2014 & February 2014) showed that one page each month was devoted to the 'Family Day List'. This notice read as follows: "We encourage Residents, Families, and responsible parties to attend the Resident's Care Conference on Family Day." Readers of the newsletter were instructed to contact one of the social workers. The remainder of the page listed the names of approximately 40 residents whose care was to be reviewed in the upcoming month.

F 280

The interview with RN "A" on 2/12/14 at 11:20 a.m. confirmed the current facility system for involving residents in the care planning process did not afford residents a chance to discuss their care and treatment alternatives before changes are made by the IDT. The current facility method of scheduling residents for their quarterly care conference required residents to consult a list and contact the facility to request a date, rather than the facility initiating personal contact and inviting residents' input and questions regarding their care and treatment. Furthermore, the process de-emphasized the residents' involvement in their own care, by calling it 'Family Day', leaving unclear the purpose of the meeting.